

COLLEGE AND TECHNICAL EDUCATION

Colleges attended Technical Schools attended	City and State	From: Mo./Yr. To: Mo./Yr.	Course of Study	Deg./Dipl. Received?

OTHER COURSE WORK OR SPECIAL TRAINING

(List Courses and Other Special Training You Have Acquired)

EMPLOYMENT EXPERIENCE AND REFERENCES

Employer and Address (Current or Last Employment First)	Your Position	Employed From/To (Mo./Yr.)	Annual Salary or Hourly Rate	Immediate Supervisor	Supervisor's Phone #

OTHER REFERENCES

You must submit a total of three (3) references, including those listed above whom we may contact.

Full Name	Complete Current Address	Telephone #	Relationship (no family members please)	Years Acquainted

My signature below certifies that to the best of my knowledge and belief, all information provided herein is complete and true. I understand that any misrepresentation of information, omission and/or false answered statements made by me on this application or any supplement to it shall be sufficient cause for 1) rejecting my candidacy, 2) withdrawal of any offer of employment, or 3) terminating my employment with the East Stroudsburg Area School District.

I further authorize East Stroudsburg Area School District to investigate my background now or in the future to verify information provided. This investigation may include such information as criminal or civil convictions, driving records (if appropriate), previous employers and educational institutions, personal references, employment references, medical records and other appropriate sources. I waive my right to access to any such information, and without limitation hereby release the school district and all persons and/or corporations supplying information concerning my background from any liability in connection with its release or use.

Date

Signature of Applicant

APPLICANTS FOR TRANSPORTATION POSITIONS, INCLUDING SCHOOL BUS DRIVERS
(ADDITIONAL INFORMATION AND SIGNATURES REQUIRED)

Have you been employed as a school bus driver or in a position requiring a Commercial Driver's License (CDL) during the past twenty-four (24) months? _____

If you answered yes, you must list your former employers in the section, Employment Experience and References, since Federal Law and Regulations (49CRF Part 382, et.al.) require school districts to obtain drug and alcohol testing information about possible hires within the previous twenty-four (24) months of employment.

I certify that the information I provided in this application is true to the best of my knowledge and release from liability all persons and/or employers/corporations supplying information, including information and documentation of my prior drug and alcohol testing.

Date _____ Signature _____

Applicants who have served in a position requiring a CDL during the past twenty-four (24) months must sign the authorization below.

I authorize the East Stroudsburg Area School District to contact my former employers during the past twenty-four (24) months to obtain information about my status with regard to drug and alcohol testing programs in which I participated.

Date _____ Signature _____

Printed Name _____

You are requested to sign the enclosed release form if applying for a school bus driver position so that the necessary information may be obtained in order to make employment decisions in a timely manner.

APPLICANTS FOR SCHOOL BUS DRIVER ONLY

Do you have a current Pennsylvania School Bus Operator's Certificate? _____

If yes, School Bus Operator Certificate # _____

Have you completed the 20 hour training program? _____ If yes, date completed _____

Have you ever been convicted of a felony or misdemeanor, including traffic violations? _____

If yes, explain _____

ALL BUS DRIVER APPLICANTS MUST ALSO COMPLETE THE TOP SECTION OF THIS PAGE.

APPLICANT PRE-EMPLOYMENT PAPERWORK

1. CRIMINAL HISTORY RECORD INFORMATION (Act 34)

(Required of All Applicants)

Persons can be employed only after submitting a clear criminal history record that is not more than one (1) year old. Apply to the Pennsylvania State Police on form SP4-164.

Check here if you have applied for, but have not yet received this information. Please send us a copy of the certified check or money order if you wish to expedite the application process.

Check here if you have enclosed the Criminal History Record.

Date issued _____
(month, date, year)

2. CHILD ABUSE HISTORY CLEARANCE (Act 151)

(Required of All Applicants)

Persons can be employed only after submitting a clear Pennsylvania Child Abuse History that is not more than one (1) year old. Apply to the Childline and Abuse Registry, Department of Public Welfare, on form CY 113 – 12/99.

Check here if you have applied for, but have not yet received this information. Please send us a copy of the certified check or money order if you wish to expedite the application process.

Check here if you have enclosed the Pennsylvania Child Abuse History Clearance.

Date issued _____
(month, date, year)

3. FBI FEDERAL FINGERPRINT CRIMINAL HISTORY RECORD (Act 114)

(Required of All Applicants)

Persons can be employed only after submitting a clear FBI Federal Criminal History Record that is not more than one (1) year old. Register online at www.pa.cogentid.com or call 1-888-439-2486.

Check here if you have registered. Please provide a copy of your online registration print-out including your registration number.

Check here if you have enclosed the FBI Federal Fingerprint Criminal History Record.

Date issued _____
(month, date, year)

ADDITIONAL INFORMATION

You may provide any additional information below which you feel is appropriate.

PLEASE NOTE: Because of the volume of applications received by our district's Personnel Office, only those individuals invited in _____ for an interview will receive follow-up information as to their employment status.